



Consultant Name	Fed ID No.	UBI No.	
Consultant Local Address	City	State	Zip

## Title VI Survey Checklist

1. Does the consultant receive Federal funding?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Has the consultant read Section VIII - Nondiscrimination of the agreement?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Does the consultant understand its content and level of responsibility placed upon them?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. Has a Title VI compliance review been conducted in the past year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Outcome? _____ _____	
5. What services to clients, if any, does your consultant provide? _____	
6. How does the consultant ensure nondiscrimination when offering such services? _____ _____	
7. Is an Equal Employment Opportunity poster displayed in a conspicuous manner?	<input type="checkbox"/> Yes <input type="checkbox"/> No
8. Name of person designated as Title VI Coordinator (Equal Opportunity Officer). Provide written documentation of this designation. _____	
9. Does the consultant have a Title VI plan in place?	<input type="checkbox"/> Yes <input type="checkbox"/> No
10. Does the consultant have a Title VI complaint procedure?	<input type="checkbox"/> Yes <input type="checkbox"/> No
11. List or attach the composition of the consultant's work force, identifying any protected group member(s). _____ _____ _____	
12. Provide an organizational chart showing placement of Title VI Program within company administration.	
<b>Comments</b> _____ _____ _____ _____ _____ _____	

Name	Title
Signature	Date